[PUBLIC] [NOT PROTECTIVELY MARKED]



Health and Wellbeing Board Minutes – 5 February 2014

Attendance

Members of the Board

Noreen Dow Chief Operating Officer, Wolverhampton CCG

Cllr Steve Evans Cabinet Member for Adult Services

Cllr Val Gibson Cabinet Member for Children and Families

Dr Helen Hibbs Chief Officer, Wolverhampton Clinical Commissioning Group (CCG)

Ros Jervis Director of Public Health, Community Directorate
Bob Jones West Midlands Police and Crime Commissioner

Sarah Norman Strategic Director – Community

Supt Mike O'Hara West Midlands Police (Wolverhampton)
Cllr Sandra Samuels Cabinet Member for Health and Wellbeing

Richard Young Director of Strategy and Solutions, Wolverhampton CCG

Other attendees

Gill Canning Programme Manager – Better Care Fund

Viv Griffin Assistant Director, Health, Wellbeing & Disability, Community Directorate

Chris Irvine Wolverhampton Voluntary Sector Council

Tony Ivko Assistant Director – Older People and Personalisation, Community

Directorate

Carol Lamyman Wolverhampton Healthwatch

Martyn Sargeant Head of Democratic Services, Delivery Directorate

Part 1 – items open to the press and public

Item No. Title

1. Apologies for absence

Apologies were received from Maxine Bygrave, Tim Johnson, Linda Lang and Cllr Paul Singh.

2. Notification of substitutions

Carol Lamyman on behalf of Linda Lang.

3. **Declarations of interest**

There were no declarations of interest.

4. Better Care Fund

[PUBLIC] [NOT PROTECTIVELY MARKED]

Richard Young gave a presentation about the Better Care Fund, describing it as a vehicle for transformational change, moving away from previous, separated ways of working. He explained it was not new funding but would draw down from existing funding streams and align this with social care funding. He advised that the Health and Well Being Board would be the oversight body for the funding and that some funding would be withheld if key performance targets were not achieved.

Richard explained work so far had been taken forward by 'director-level' representatives of each of the four main organisations, but that an initial submission had to be made to NHS England by 14 February.

He outlined two key phases, an establishment phase in years one and two, followed by a development phase from years two to five. He noted the initial phase would create the foundations for radical changes in provision and systems in the second phase that could yield efficiencies.

Richard proposed that an Interim Development Board would manage development of the Better Care plan, directly accountable to the Health and Well Being Board and with strong accountability links to the commissioning bodies. He further suggested this would have implications for the existing governance structures, which might need to evolve to reflect the new arrangements.

Cllr Evans welcomed the proposals but emphasised the need for any future governance structures to maintain appropriate political accountability, recognising these changes offered the opportunity for the Health and Well Being Board to further develop its effectiveness.

Cllr Gibson noted that she would not, at this time, endorse any removal of the Children's Trust Board. Richard Young confirmed this had been omitted from the governance structure in error.

Sarah Norman noted the Board had the potential to be responsible for in excess of £20m of pooled budgets, and this highlighted some important issues for consideration.

Bob Jones queried the detail of the direction of travel relating to the governance structures. He suggested, as one option, that the Board might need a small executive to oversee more detailed work. Richard Young assured the Board that this was not seen as an opportunity for radical change but evolving the structures to secure effective governance, potentially focused more at the operational and executive level than for the strategic partnership.

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Helen Hibbs emphasised the potential of the Fund to secure change, noting the health economy in Wolverhampton cannot be sustained if it maintains the current level of focus on acute services. Ros Jervis underlined this and the importance of moving the focus towards preventative services.

Resolved:

- (1) To note the requirements of the Better Care Fund.
- (2) To note the work undertaken to date.
- (3) To agree the vision statement developed at the Whole System Event (January 2014) 'One ambition, working as one, for everyone'.
- (4) To agree the identified work streams, focusing the defined metrics in accordance with local need.
- (5) To approve, in principle, the direction and ambition of the programme.
- (6) To acknowledge the planning requirements and submission deadlines for the Better Care Fund plan.
- (7) To note the requirements for a change in governance/accountability required of the Health and Well Being Board and to commission a task and finish group to develop proposals about structures and the associated terms of reference.
- (8) To adopt the Interim Development Board proposal.
- (9) To receive a draft document for approval at the subsequent meeting.

5. **Date of next meeting**

The Board agreed to defer its next meeting (5 March) to 19 March at 2pm to fit with the Better Care Fund timeline.